

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT(S)

FILING DATE

12 MAY 2007

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5		4		1		
6		4		1		
7		4		1		
8		4		1		
9		4		1		
10		4		1		
11	/		/			
12	/		/			
13	/		/			
14	/		/			
15		4		1		
16		8		1		
17		4		1		
18		4		1		
19		8		1		
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50						
TOTAL IND.	8	↓	8	↓		↓
TOTAL DEP.	92	←	16	←		←
TOTAL CLAIMS	100		24			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						